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Washington, DC 20231  
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Bib Data Sheet

CONFIRMATION NO. 8760

<b>SERIAL NUMBER</b> 09/363,949	<b>FILING DATE</b> 07/29/1999 <b>RULE</b>	<b>CLASS</b> 709	<b>GROUP ART UNIT</b> 2157	<b>ATTORNEY DOCKET NO.</b> AT9-99-201	
<b>APPLICANTS</b> DUANE KIMBELL FIELDS, AUSTIN, TX; SEBASTIAN DANIEL HASSINGER, BLANCO, TX; MARK ANDREW KOLB, ROUND ROCK, TX;					
<b>** CONTINUING DATA *****</b>					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 08/18/1999</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met <i>allowance</i> Verified and Acknowledged <i>Examiner's Signature</i> <i>Initials</i>		<b>STATE OR COUNTRY</b> TX	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 29	<b>INDEPENDENT CLAIMS</b> 7
<b>ADDRESS</b> Duke W. Yee Carstens Yee & Cahoon, LLP P. O. Box 802334 Dallas, TX 75380					
<b>TITLE</b> METHOD FOR EXTENDING CAPABILITIES OF AN ARBITRARY WEB SERVER					
<b>FILING FEE RECEIVED</b> 1234	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/363,949	07/29/99	707	2776	AT9-99-201

APPLICANT

DUANE KIMBELL FIELDS, AUSTIN, TX; SEBASTIAN DANIEL HASSINGER, BLANCO, TX;  
MARK ANDREW KOLB, ROUND ROCK, TX.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*

VERIFIED

None LJ

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*

VERIFIED

None LJ

\*\*FOREIGN APPLICATIONS\*\*\*\*\*

VERIFIED

None LJ

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 08/18/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and Acknowledged	<u>LJ</u> Examiner's Initials	<u>LJ</u> Initials	TX	4	29

ADDRESS

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SUITE 2800  
DALLAS TX 75201

TITLE

METHOD FOR EXTENDING CAPABILITIES OF AN ARBITRARY WEB SERVER

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____
\$1,234		